# SECURITIES AND EXCHANGE C

Washington, D.C. 2054

FORM D

# NOTICE OF SALE OF SECU **PURSUANT TO REGULAT** SECTION 4(6) AND/OK

UNIFORM LIMITED OFFERING EXEMPTION



|   | April 30, 2008 |
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| EC USE | ONLY |        |
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Date Received

| 4 7  | amendment and name has changed, and indicate change   | .)   |
|--|---|--|
| Offer and Sale of Limited Partner Interests in   |   | Series 4(c) PUIDE                                      |
| Filing Under (Check box(es) that apply):  Type of Filing:   New Filing □ An                | □ Rule 504 □ Rule 505 図 Rule 506 □ S  | ection 4(6) ULOE                                       |
| Type of Filing: Make Filing Li An  |   | W 6 133  |
|  | A. BASIC IDENTIFICATION DATA  |  |
| 1. Enter the information requested about the   | issuer  |  |
| Name of Issuer ( Check if this is an ame<br>Meritage Private Equity Fund II-PA, L.P.       | ndment and name has changed, and indicate change.)  |  |
| Address of Executive Offices 1600 Wynkoop Street, Suite 300, Denver, Co                    | (Number and Street, City, State, Zip Code)<br>0 80202   | Telephone Number (Including Area Code)<br>860-674-8066 |
| Address of Principal Business Operations (if different from Executive Offices)             | (Number and Street, City, State, Zip Code)  | Telephone Number (Including Area Code)                 |
| Brief Description of Business  |   | PROCESSE   |
| Investment in other businesses.  |   | JUN 0 9 2006   |
| Type of Business Organization  |   | THOMSON  |
|  | ☑ limited partnership, already formed ☐ o   | ther (please specify): FINANCIAL                       |
| □ business trust   | ☐ limited partnership, to be formed   | A WOINE  |
| Actual or Estimated Date of Incorporation or Jurisdiction of Incorporation or Organization | Organization:  (Enter two-letter U.S. Postal Service abbreviation for CN for Canada; FN for other foreign jurisdiction) | ☐ Estimated  |

### **GENERAL INSTRUCTIONS**

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6)

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering. any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those state that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number. 7387/49778-001 Current/8520547v2

SEC 1972 (6/99) 1 of



### A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer: Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer Director General Partner of Issuer Full Name (Last name first, if individual) Meritage Investment Partners II, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 1600 Wynkoop Street, Suite 300, Denver, CO 80202 Check Box(es) that Apply: Promoter ☐ Beneficial Owner □ Director General and/or Managing Partner Full Name (Last name first, if individual) Tankersley, G. Jackson, Jr. Business or Residence Address (Number and Street, City, State, Zip Code) 1600 Wynkoop Street, Suite 300, Denver, CO 80202 Promoter Beneficial Owner Check Box(es) that Apply: ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Beller, Laura I. Business or Residence Address (Number and Street, City, State, Zip Code) 1600 Wynkoop Street, Suite 300, Denver, CO 80202 Check Box(es) that Apply: Promoter Beneficial Owner ■ Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Garrett, John R. Business or Residence Address (Number and Street, City, State, Zip Code) 1600 Wynkoop Street, Suite 300, Denver, CO 80202 Check Box(es) that Apply: ■ Executive Officer ☐ Promoter ☐ Beneficial Owner □ Director General and/or Managing Partner Full Name (Last name first, if individual) Kerr, Tracy O. Business or Residence Address (Number and Street, City, State, Zip Code) 1600 Wynkoop Street, Suite 300, Denver, CO 80202 Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

(Number and Street, City, State, Zip Code)

☐ Beneficial Owner

(Number and Street, City, State, Zip Code)

Executive Officer

☐ Director

General and/or
Managing Partner

Promoter

Business or Residence Address

Business or Residence Address

Full Name (Last name first, if individual)

Check Box(es) that Apply:

|   |   |  |  | B. INF               | ORMATIC                      | ON ABOU                      | r offeri                    | NG                                      |                              |                             |                        |                    |
|---|---|--|--|----------------------|------------------------------|------------------------------|-----------------------------|---|------------------------------|-----------------------------|------------------------|--------------------|
| 1. Has the is   | suer sold, o                                | or does the is                                 | ssuer intend                                 | i to sell, to        | non accredi                  | ited investo                 | rs in this of               | fering?                                 |                              |                             | Yes                    | No<br>⊠            |
|   | ŕ   |  |  |                      | Appendix,                    |                              |                             | Ü                                       |                              |                             |                        |                    |
| 2. What is th   | a minimun                                   | a invectmen                                    |  |                      |                              |                              |                             |   |                              |                             | \$_5,000,              | 000*               |
| *Minimum inve   |   |  |  | •                    | •                            |                              |                             | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | ****************             | *********                   | <u> </u>               | 000                |
|   |   | 9  |  | 9 F                  |                              |                              |                             |   |                              |                             | Yes                    | No                 |
| 3. Does the o   | offering per                                | mit joint ov                                   | vnership of                                  | a single un          | it?                          |                              | •••••                       |   | ************************     |                             | Ø                      |                    |
| 4. Enter the remuneration agent of a bropersons to be Full Name (L. | for solicita<br>ker or deal<br>listed are a | ition of pure<br>er registered<br>associated p | chasers in c<br>d with the S<br>ersons of si | onnection SEC and/or | with sales o<br>with a state | f securities<br>or states, l | in the offer<br>ist the nam | ing. If a pe<br>e of the bro            | rson to be l<br>ker or deale | listed is an<br>er. If more | associate<br>than five | d person or (5)    |
| Business or R   | tesidence A                                 | ddress (Nu                                     | mber and S                                   | street, City,        | State, Zip (                 | Code)                        |                             |   |                              |                             |                        |                    |
|   |   |  |  |                      |                              |                              |                             |   |                              |                             |                        |                    |
| Name of Asse  | ociated Bro                                 | ker or Deal                                    | er   |                      |                              |                              |                             |   |                              |                             |                        |                    |
|   | <del> </del>                                |  |  |                      |                              |                              |                             |   |                              |                             |                        |                    |
| States in Whi   |   | Listed Has S<br>or check ind                   |  |                      |                              |                              |                             |   |                              |                             | П                      | All States         |
| [AL]  | [AK]  | [AZ]   | [AR]   | [CA]                 | [CO]                         | [CT]                         | [DE]                        | [DC]                                    | [FL]                         | [GA]                        | [HI]                   | [ID]               |
| [iL]  | [IN]  | [lA]   | [KS]   | [KY]                 | [LA]                         | [ME]                         | [MD]                        | [MA]                                    | [MI]                         | [MN]                        | [MS]                   | [MO]               |
| [MT]  | [NE]  | [NV]   | [NH]   | [NJ]                 | [NM]                         | [NY]                         | [NC]                        | [ND]                                    | [OH]                         | [OK]                        | [OR]                   | [PA]               |
| [R1]  | [SC]  | [SD]   | [TN]   | [TX]                 | [UT]                         | [VT]                         | [VA]                        | [WA]                                    | [WV]                         | [WI]                        | [WY]                   | [PR]               |
| Business or R   |   |  |  | treet, City,         | State, Zip (                 | Code)                        |                             |   |                              |                             |                        |                    |
| Name of Asso  | ociatea Bro                                 | ker or Deal                                    | er   |                      |                              |                              |                             |   |                              |                             |                        |                    |
| States in Whi   |   | Listed Has S                                   |  |                      |                              |                              |                             |   |                              |                             |                        | All States         |
| [AL]  | [AK]  | [AZ]   | [AR]   | [CA]                 | [CO]                         | [CT]                         | [DE]                        | [DC]                                    | [FL]                         | [GA]                        | [HI]                   | /III States        |
| [IL]  | [IN]  | [lA]   | [KS]   | [KY]                 | [LA]                         | [ME]                         | [MD]                        | [MA]                                    | [MI]                         | [MN]                        | [MS]                   | [MO]               |
| [MT]  | . [NE]                                      | [NV]   | [NH]   | [NJ]                 | [NM]                         | [NY]                         | [NC]                        | [ND]                                    | [OH]                         | [OK]                        | [OR]                   | [PA]               |
| [RI]  | [SC]  | [SD]   | [TN]   | [TX]                 | [UT]                         | [VT]                         | [VA]                        | [WA]                                    | [WV]                         | [WI]                        | [WY]                   | [PR]               |
| Full Name (L  | ast name fi                                 | rst, if indivi                                 | idual)                                       |                      |                              |                              |                             |   |                              |                             |                        |                    |
|   |   |  |  |                      |                              |                              |                             |   |                              |                             |                        |                    |
| Business or R   | tesidence A                                 | ddress (Nu                                     | mber and S                                   | treet, City.         | State, Zip (                 | Code)                        |                             |   |                              |                             |                        |                    |
|   |   |  |  |                      |                              |                              |                             |   |                              |                             |                        |                    |
| Name of Asso  | ociated Bro                                 | ker or Deale                                   | er   |                      |                              |                              | <del></del>                 |   |                              |                             |                        |                    |
| States in Whi   |   |  |  |                      |                              |                              |                             |   |                              | <del></del>                 |                        |                    |
| (Check ".<br>[AL]   | All State" o                                | or check ind<br>[AZ]                           | ividual Sta<br>[AR]                          | tes)<br>[CA]         | [CO]                         | [CT]                         | [DE]                        | [DC]                                    | [FL]                         | [GA]                        | <br>[HI]               | All States<br>[ID] |
| [IL]  | [IN]  | [IA]   | [KS]   | [KY]                 | [LA]                         | [ME]                         | [MD]                        | [MA]                                    | [MI]                         | [MN]                        | [MS]                   | [MO]               |
| [MT]  | [NE]  | [NV]   | [NH]   | [NJ]                 | [NM]                         | [NY]                         | [NC]                        | [ND]                                    | [HO]                         | [OK]                        | [OR]                   | [PA]               |
| [RI]  | [SC]  | [SD]   | ITNI   | (TX)                 | IUT1                         | [VT]                         | [VA]                        | [WA]                                    | [WV]                         | (WII                        | fWYI                   | [PR]               |

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

| 1. | Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box   and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.  |                             |  |
|----|--|-----------------------------|--|
|    |  | Aggregate<br>Offering Price | Amount Already<br>Sold                     |
|    | Debt   | \$_0                        | \$0  |
|    | Equity   | \$ <u>0</u>                 | \$0  |
| ٠. | □ Common □ Preferred   | <i>;</i>                    |  |
|    | Convertible Securities (including warrants)  | \$ <u>0</u>                 | \$_0                                       |
|    | Partnership Interests  | \$20,571,400                | \$20,285,700                               |
|    | Other (Specify)  | \$ <u>0</u>                 | \$_0                                       |
|    | Total  | \$20,571,400                | \$20.285,700                               |
|    | Answer also in Appendix, Column 3, if filing under ULOE.   |                             |  |
| 2. | Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."                         | Number<br>Investors         | Aggregate<br>Dollar Amount<br>of Purchases |
|    | Accredited Investors   | 4                           | \$20,285,700                               |
|    |  | 0                           | \$ 0                                       |
|    |  |                             |  |
|    | Total (for filings under Rule 504 only)  | N/A                         | \$N/A                                      |
| 3. | Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under <u>Rule 504</u> or <u>505</u> , enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1 |                             |  |
|    | Type of offering   | Type of<br>Security         | Dollar Amount<br>Sold                      |
|    | Rule 505   | N/A                         | \$ <u>N/A</u>                              |
|    | Regulation A   | N/A                         | \$ <u>N/A</u>                              |
|    | Rule 504   | N/A                         | \$ <u>N/A</u>                              |
|    | Total  | N/A                         | \$ <u>N/A</u>                              |
| 4. | a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.              |                             |  |
|    | Transfer Agent's Fees  |                             | \$_0                                       |
|    | Printing and Engraving Costs   |                             | \$ 0                                       |
|    | Legal Fees   |                             | \$45,000                                   |
|    | Accounting Fees  |                             | \$_0                                       |
|    | Engineering Fecs   |                             | \$ <u>0</u>                                |
|    | Sales Commissions (specify finders' fees separately)   |                             | 3 \$ <u>0</u>                              |
|    | Other Expenses (identify) Miscellaneous expenses   |                             |  |
|    | Total  |                             |  |
|    | rotal  | K                           | # \$113,000                                |

| b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."  |             |  |             | \$ <u>20,456,400</u>  |
|---|-------------|--|-------------|-----------------------|
| Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above. |             |  |             |                       |
|   |             | Payments to<br>Officers,<br>Directors, &<br>Affiliates | 1           | Payments To<br>Others |
| Salaries and fees   | $\boxtimes$ | \$   |             | \$_0                  |
| Purchase of real estate   |             | \$_0   |             | \$_0                  |
| Purchase, rental or leasing and installation of machinery and equipment   |             | \$_0   |             | \$_0                  |
| Construction or leasing of plant buildings and facilities   |             | \$ <u>0</u>  |             | \$_0                  |
| Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another   |             |  |             |                       |
| issuer pursuant to a merger)  |             | \$_0   |             | \$ <u>0</u>           |
| Repayment of indebtedness   |             | \$_0   |             | \$_0                  |
| Working Capital   |             | \$ <u>0</u>  |             | \$_0                  |
| Other (specify): Investment in private equity limited partnerships and similar entities.  |             | \$_0   | ×           | \$ <u>**</u>          |
| Column Totals   | ⊠           | \$ <u>*</u>  | $\boxtimes$ | \$ **                 |

|    |   |    |    |   | - |   |
|----|---|----|----|---|---|---|
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Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

### Instruction

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

<sup>\*</sup> The Issuer shall pay to Meritage Investment Partners II, LLC an annual fee (the "Management Fee") calculated in accordance with the Partnership Agreement of the Issuer.

<sup>\*\* \$20,456,400</sup> minus the Management Fee.

|  | D. FEDERAL SIGNATURE  |
|--|---|
| following signature constitutes an undertakin                      | igned by the undersigned duly authorized person. If this notice is filed under <u>Rule 505</u> , the g by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of uer to any non-accredited investor pure uant to paragraph (b)(2) of <u>Rule 502</u> . |
| Issuer (Print or Type)<br>Meritage Private Equity Fund II-PA, L.P. | Signature Date May 35, 2006   |
| Name of Signer (Print or Type)                                     | Title of Signer (Print or Type)   |
| John R. Garrett  | Managing Director of Meritage Investment Partners II, LLC, general partner of the issuer  |

## - ATTENTION —

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<sup>\*</sup> The Issuer shall pay to Meritage Investment Partners II, LLC an annual fee (the "Management Fee") calculated in accordance with the Partnership Agreement of the Issuer.

<sup>\*\* \$20,456,400</sup> minus the Management Fee.